

THE BOSTON  
MEDICAL AND SURGICAL JOURNAL.

Vol. III.]

TUESDAY, JANUARY 18, 1831.

[No. 49.]

I.

HISTORY OF A CASE OF STAMMERING,

*Successfully treated by the long-continued Use of Cathartics.*

By JOHN BOSTOCK, M.D.F.R.S.\*

IMPEDIMENTS of speech are usually regarded as originating either in a physical defect of the organs which are exercised in the production of articulate sounds, or as proceeding from some cause more of a mental nature, as habit, imitation, or the like. The modes of treatment that have been proposed, as far as we are made acquainted with them, are accordingly adapted to one or other of these supposed causes, and consist either in certain methods of managing the muscles that are concerned in speech, or in counter-acting those circumstances which may be supposed to induce the habit, or the tendency to imitation. A case has fallen under my observation, which has led me to take a different view of the subject; and as the treatment has been, upon the whole, successful, I presume that a short account of it will be acceptable to the society.

A boy, of a robust form and florid aspect, of a healthy constitution, and of more than ordinary activity both of mind and body,

when between two and three years old, and after having acquired considerable readiness in speaking, was suddenly affected with so great a degree of stammering as to be almost incapable of uttering a single syllable. Two eminent physicians were consulted: they confessed their inability to propose any specific plan of treatment which might afford a prospect of success, but in consequence of a somewhat plethoric state of the child, they advised that a strong purgative should be given. The effect of the medicine appeared so favorable, that it was repeated three or four times, and each time with such decided benefit, as to leave no doubt on this point in the minds either of the parents or the practitioners. The complaint, however, shortly recurred, was again attacked with the same remedy, and was again subdued. After this plan had been continued for some time, it was conceived that, in addition to the purgative system, the effect of which, although so salutary, was temporary, further advantage might be obtained by adopting a system of diet which should permanently reduce the plethoric habit, and obviate the necessity for the continual repetition of the purgatives. This was accordingly done, and was rigidly adhered to for several years. Animal food was totally abstained from, and even vegeta-

\* Medico-Chirurgical Transactions.

bles were taken in as sparing a quantity as was consistent with the support of the system. The effect of this regimen was sufficiently apparent in the altered aspect of the child, who became much less plump and florid, but still retained a due share of vigor and activity, and was fully adequate to enter into all the sports and exercises suited to his age. I had frequent opportunities of witnessing the result of this plan, and I may venture to assert, that it is impossible to have stronger evidence of the beneficial operation of any medical treatment, than is presented by the case in question.

By a steady adherence to this discipline for about eight years, the complaint was kept at bay; but whenever any relaxation in the diet took place, or when the purgatives were omitted or too long delayed, symptoms of the impediment immediately appeared. At length, when about twelve years of age, the tendency seemed so far subdued, that a relaxation of the restrictions was not followed by the usual unfavorable consequences, and the boy being then at a public school, it was not so easy to maintain the former discipline. For some time no bad effects ensued, but at length the complaint recurred, and was unusually obstinate, so as to require a long and severe course of purgatives, which, however, was finally successful.

During the last two years, the tendency has occasionally manifested itself; but it has always been easily removed by a moderate use of purgatives, and by a temperate, although not a rigidly abstemious diet. The boy, who is now in his fifteenth year, may be said to be free from the complaint.

No one but those who are aware of the circumstances of the case, and were on the watch to detect even a slight defect, would notice anything peculiar in his mode of speaking. He even possesses a considerable rapidity and volubility of enunciation; and as a proof of this I may state, that I was lately present at a juvenile exhibition, when he bore a conspicuous part in a comic dialogue, in which he displayed a complete command over the organs of speech. In this respect, he may be favorably contrasted with many of those individuals who have been under the care of the masters who profess to remove these impediments. It would be unjust not to admit that they occasionally produce very beneficial effects on those committed to their care, but I think it may be asserted, that in all these cases there is a certain peculiarity in the mode of speaking, which, although much preferable to decided stammering, indicates that the difficulty is rather evaded than obviated.

With respect to the purgatives employed in this case, it appeared to be of little importance which were used, provided the bowels were very completely evacuated. What was the most frequently employed was a full dose of calomel and jalap, succeeded by Epsom salts. Whenever the examination was made, it was found that the feces were in a morbid state; and while the child was young, and the examination could be easily made, the necessity for continuing the medicine was judged of as much by the appearance of the feces as by the state of the symptoms. It happened, on two or three occasions, that a degree of salivation was unintentionally excited, but

it was not easy to determine whether this circumstance was productive of any advantage, as the relaxation of the bowels was contemporary and proportional.

How far we may be allowed to draw a general inference from a single case, I will not venture to decide; but I may be allowed to say, that a trial should be made of a plan of treatment which is productive of no inconvenience, and does not interfere with education, or with the ordinary habits of life. It may be difficult to determine how far such a process should be recommended to adults: much must depend upon age, constitution, temperament, &c.; but I should suppose that few individuals would object to submit to a trial, although the hope of success may not be considerable.

As I propose this communication to be of a practical nature, I abstain from entering into any pathological observations on the nature and cause of the affection, further than to remark, that the complaint appears to consist essentially in a loss of power over certain voluntary muscles; and that, as the muscles themselves do not seem to be affected, it ought probably to be referred to the class of nervous diseases, and may be regarded as analogous to chorea, differing from it principally in its seat, and in its being confined to one set of muscles,—while chorea affects a much greater number of parts, and produces a proportionally greater disturbance of the constitution and functions.

## II.

### DR. HOUSTON ON THE MUCOUS MEMBRANE OF THE RECTUM.\*

THE structure, form, and disposition, of the tunics entering into the composition of the rectum, ought, of course, to be familiar to all who venture to meddle with this gut. Yet they certainly are not so, and probably the majority of the reputed strictures of the rectum are not strictures at all, but merely some of the natural impediments offered to the introduction of foreign bodies. Dr. Houston, whilst engaged in anatomical preparations illustrative of the peculiar and relative anatomy of the parts in the pelvis, discovered the existence of valves in the rectum, formed by its mucous membrane. The mode of exhibiting them consists in distending and hardening all the parts with spirit previously to being cut open.

“The valves exist equally in the young and in the aged, in the male and in the female; but in different individuals there will be found some varieties as to their number and position. Three is the average number, though sometimes four, and sometimes only two are present in a marked degree. The position of the largest and most regular valve is about three inches from the anus, opposite to the base of the bladder. The fold of next most frequent existence is placed at the upper end of the rectum. The third in order occupies a position about midway between these, and the fourth, or that most rarely present, is attached to the side of the gut, about one inch above the anus.

“In addition to these valves, of

\* Dublin Hospital Reports, Vol. V.

tolerably regular occurrence, there are frequently several intermediate smaller ones, but which, from their trifling projection and want of regularity in their situation, merit comparatively little notice.

"The form of the valves is semilunar: their convex borders are fixed to the sides of the rectum, occupying, in their attachments, from one third to one half of the circumference of the gut. Their surfaces are sometimes horizontal, but more usually they have a slightly oblique aspect, and their concave floating margins, which are defined and sharp, are generally directed a little upwards. The breadth of the valves about their middle varies, from a half to three quarters of an inch and upwards, in the distended state of the gut. Their angles become narrow, and disappear gradually in the neighboring membrane. Their structure consists of a duplicature of the mucous membrane, enclosing between its laminæ some cellular tissue, with a few circular muscular fibres.

"The relative position of the valves, with respect to each other, deserves attention. That situated opposite to the base of the bladder, most commonly projects from the anterior wall of the gut; the valve next above from the left, and the uppermost from the left: that near the anus, which is of least frequent occurrence, occupies a place, when present, towards the left and posterior wall. Many deviations from these stated points of attachment for the folds will be found to occur, but the arrangement is nevertheless always such, as to form, by their being placed

successively on different sides of the gut, a sort of spiral tract down its cavity.

"In regard of the sacculated form which the rectum acquires by the presence of these valves, the gut resembles somewhat the colon in the condition of its interior; but in the peculiar spiral arrangement of the valves, it bears more an analogy to the large intestine of some of the lower animals, in which—as, for example, the cæcum of the rabbit, the large intestine of the serpent and dog-fish—a continuous spiral membrane traverses the cavity from end to end, and gives to the alimentary matters a protracted winding course towards the anus."

The presence of these valves may be ascertained in the unprepared body, if looked for soon after death, and before the tonic contraction of the gut has subsided. They then overlap each other so effectually, as to require considerable manœuvre in conducting a bougie or the finger along the cavity of the intestine. Mr. Crampton uses a rectum bougie bent with a couple of light spiral turns, and, in the introduction, moves it about gently with his thumb and fingers. He was induced to adopt this form, from having noticed that of itself it assumed such, when allowed to become soft by remaining some time up the gut. He practises the spiral movement, from observing that during its return down the canal, after being thus modelled, it is disposed, if handled loosely, to take on that course. Dr. Houston suggests that these valvular folds may possibly become the most frequent seat of stricture; and he mentions some

points connected with that affection, which tend to support, in some measure, his suggestion.

### III.

#### ABSENCE (CONGENITAL) OF THE ANTERIOR LOBES OF THE BRAIN.

From the Medico-Chirurg. Review.

IN the annual report of the new Anatomical Society of Paris, a preparation was shown by M. Lacroix, exemplifying the above mal-organization. The secretary of the society makes use of the following words:—"If the opinion which assigns to the anterior lobes of the brain the privilege of presiding over the higher intellectual operations, needed any new confirmation, it would find a powerful argument in its favor in the case reported by M. Lacroix. In that case there was a complete congenital absence of the anterior lobes of the cerebrum, which were replaced by a collection of transparent serum communicating freely with the ventricles. This physical condition was accompanied, not by perversion, but by an almost entire nullity of the intellectual and moral functions. Here was an experiment made by nature, more valuable for physiology than any vivisections of the anatomist." The secretary remarks that this case tells both for and against the phrenologists;—for them, as showing the seat of intelligence to be in the anterior part of the brain—against them, as showing that their skill could not have detected the cause of the idiocy, since the forehead was well formed, though full of water, and all the prominences well marked.

Almost at the same time that

the above preparation was shown, another came under view where the left hemisphere of the brain was found atrophied to one half its original volume, without any loss of intellectual faculties, the other lobe being entire. The atrophy was occasioned by an accumulation of fluid in the lateral ventricle of that side, and the opposite half of the body was completely paralytic.

### IV.

#### LANCETTED STILETTES IN STRICTURE.

MR. STAFFORD has very laudably published an appendix to, instead of a new edition of his work on strictures, for the accommodation of those who hold the second edition. He informs us that he has now operated on more than forty cases of permanent stricture, of the worst description, without a single failure. "In no instance has there been a false passage made, nor has the cutting through the contracted part caused pain, hemorrhage, inflammation, or any other unfavorable symptom." The hardened structure of the stricture has been absorbed, and no relapse has taken place, as far as he knows. In addition to these cases, he has, on two different occasions, divided through an enlarged third lobe of the prostate gland, which in one case had caused total, and in the other partial retention of urine. In both cases, the patients recovered the complete power of the bladder. We shall introduce a single case out of 18 here published.

"Case 11.—A distinguished general officer, rather more than

sixty years of age, and of a shattered constitution, from hard service in India, the Peninsula, and other countries, placed himself under my care with a diseased urethra, which he had dreadfully suffered from for more than thirty years. The canal was irregularly thickened and contracted to four inches in extent, which began exactly four inches distant from the orifice, and terminated at the prostate gland. He had frequently undergone courses of bougies, and the application of caustic, without any beneficial result; at length ulceration took place in the urethra, the urine was extravasated, and a fistulous passage ensued in the perineum. In course of time this healed up—since which the passage gradually got worse, until it would not admit anything larger than a No. 3 bougie, which, for the last six months, he has always been obliged to pass into the bladder before he could make water—and if he did not succeed in that operation, he invariably suffered from retention of urine. His bladder, also, had partly lost its power, expelling only about half its contents. The urine was always extremely fetid, and of a turgid dark color—and there was very frequently deposited a considerable quantity of sediment at the bottom of the chamber-pot, of a tenacious thick mucus, such as is secreted in diseases of the prostate gland.

“Having given up all hope of deriving any benefit from the common mode of treatment, he made up his mind to have the diseased structure gradually divided by the stilette. This I accomplished by four different operations, from time to time, and dur-

ing the whole treatment no unfavorable symptom occurred. At length I was enabled to introduce a No. 12 flexible catheter into the bladder, which I left there a few days. After this time I discharged my patient, allowing him to pass bougies for himself twice a week until the cure was complete. I have since heard from him by letter, in which he states—

“I can now decidedly say, from experience, that your operation has succeeded to my fullest expectation. I have never any difficulty in making water, and I have invariably passed the bougie you desired me—No. 13—without stoppage, pain, or difficulty, every fourth day, and I can even pass a large No. 14.”

“He can now expel the whole contents of the bladder: the urine is never fetid, and the prostatic secretion has entirely disappeared.”—*Id.*

## V.

### CASE OF RECOVERY FROM RUPTURED UTERUS.

By J. W. K. PARKINSON.

From the London Medical Gazette.

ON the 20th of May, 1821, between four and five o'clock, P. M., I was hastily called upon by the late Mrs. Maddock, a very respectable and intelligent midwife, who requested me to accompany her to a Mrs. Rumney, 6 Hammond Square, Hoxton, to a case, as she believed, of rupture of the uterus. She informed me, on our way thither, that she had been sent for two hours before, and found the patient in strong labor; that, upon examination per vaginam, she found the

os uteri fully dilated, and the head of the child low down in the pelvis; that the pains increasing, the head began to press on the perineum, which led her to expect speedy delivery, when suddenly, during a strong pain, the patient gave a loud scream, and said, "Oh, what a pain! I am sick—I am sure something has burst in my belly!"—and upon making an examination, the midwife found that the head had entirely receded beyond the reach of her finger. The patient now, she said, became affected with vomiting and hiccoughing; and from the change which had taken place in her countenance, she thought the poor woman was dying. Before she came off for me, the patient requested that a pillow might be put under her belly, for she could not bear the weight of the child.

On my arrival, I found the patient free from pain, but her countenance was expressive of much anxiety and alarm; her respiration was much hurried, and occasionally interrupted by hiccough; her pulse was very small and irregular. Just before I saw her, she had vomited a small quantity of dark brown-colored fluid.

On making an examination per vaginam, I could not discover any part of the child, although I passed my hand sufficiently high to ascertain that the capacity of the superior aperture of the pelvis was somewhat diminished by a projection of the sacrum. On placing my hand on the abdomen, I could distinctly feel the child through the parietes.

Convinced that Mrs. Maddock was right in her conjecture, I immediately proceeded to deli-

ver, by bringing down the feet of the child, which was very easily accomplished, the uterus not offering the least resistance; indeed I was hardly sensible of the existence of that organ—for after my hand had passed the head of the child, which was lying loosely over the superior aperture of the pelvis, it seemed at once to enter the cavity of the abdomen.

The hemorrhage, which before delivery was very trifling, now became very considerable, and the poor creature appeared to be sinking fast. I again introduced my hand for the purpose of bringing away the placenta, which I found detached, and lying in contact with the intestines, the convolutions of which I distinctly felt. Withdrawing the placenta with my right hand by means of the funis, and keeping the left hand in the cavity for the purpose of preventing the protrusion of the intestines, after a little time I was agreeably surprised to find it gently acted on by the uterus, when I gradually withdrew it.

Although I considered the case as hopeless, I was pleased to find, after my hand had been withdrawn, that the hemorrhage considerably diminished; and that by frequently supplying her with small quantities of weak brandy and water, she was so much revived, about an hour after delivery, as to tell me, though with a very feeble voice, that she felt better. Her respiration, too, had become more tranquil, and with less hiccough, but her pulse was very feeble and fluttering, and she made frequent efforts to vomit. I gave her, as soon as possible, sixty minims of Tr. Opii, and ordered thirty minims to be repeated every three hours. She



was delivered about 6 o'clock, P. M., and I saw her again five hours afterwards, and was told that the first dose of Tr. Opii had been retained, but that the second had been rejected, which had also been the case with small quantities of gruel, and brandy, which had been occasionally given her. She was now evidently under the influence of the opium, but I thought the appearance of her countenance was improved. Her pulse was certainly more determined and regular.

I visited her again early the next morning, and learned that she had not had much sleep, but that she had lain very quiet, except when occasionally disturbed by vomiting or hiccough. As some degree of reaction had now taken place in the system generally, and as she complained of much pain in the region of the uterus, especially when the left side was pressed upon, I took fourteen ounces of blood from her arm, and ordered her saline medicines to be taken through the day, and an opiate at night. On my visit the next day, though there had been occasional returns of vomiting and hiccoughing, I considered her in other respects better. Her pulse had acquired considerable steadiness, and was not too frequent, and there was much less complaint of pain when the abdomen was pressed. The bowels not having been relieved since her delivery, I directed that a drachm of Magnes. Sulph. should be added to each dose of her saline medicine, and which, with the assistance of an emollient injection, soon produced the desired effect. I should have stated, that a moderate discharge of a slight sanguineous character had

taken place from the vagina during the whole of the time since delivery, and which had now become rather offensive. Nothing worth remarking took place after this time; the pain of the abdomen, with the other distressing symptoms, gradually left her; so that at the end of a fortnight she was free from any complaint except debility and a slight sanguineo-purulent discharge from the vagina.

It is necessary that I should state that Mrs. Rumsey, the subject of the above case, was 36 years of age, of a very short stature, but apparently of a sound constitution. She had been the mother of several children, most of whom had been born alive, after tedious but safe labors.

There are some interesting points respecting this woman's subsequent labor, which I should have wished to have mentioned; but which, with a few remarks I had intended to have made on the operation of turning the child in utero, and on the cases requiring it, I shall reserve for a future number, having already, I fear, trespassed too much on your valuable pages.

## VI.

### CASE OF CONICAL CORNEA.

For the Boston Med. and Surg. Journal.

MR. EDITOR,—In a late number of this Journal—Dec. 6, 1830—are contained some remarks, taken from the Western Journal of Medicine, on a disease of the eye called *Conical Cornea*, upon which I have a few facts to communicate. And as the disease is pronounced incurable—by Mr. Travers, in his Synopsis of the Dis-



eases of the Eye—by any means hitherto tried, I have thought that even one *true* fact (among the numerous *false* facts with which the records of medicine abound) would be worthy of notice.

On Professor Staughton's communication I would only remark, that if his knowledge of the different branches of Surgery, of which he is Professor, be of that definite and critical character which his remark that a pin-hole through a card might perhaps answer as well, in assisting vision in cases of conical cornea, as the tubular spectacle frame of Mr. Travers, would seem to indicate that he possessed of the principles of Optics, he must be preëminently qualified to discharge the duties of his office.

But in relation to the disease, I wish first to remark, in respect to Mr. Travers' assertion that "it is unprecedented by inflammation or any assignable cause," that I have seen two cases of this disease preceded by conjunctival ophthalmia; and in one of these, there was conjoined iritis, followed by hypopion.

Mr. Travers observes that he never has seen it commencing in old age. In one of my cases, the individual was about 60 years old.

The same gentleman observes that "all attempts to remove this disease have hitherto proved ineffectual;" and Mr. Guthrie, in his most excellent work on the "Operative Surgery of the Eye," makes the same assertion.

Aware how little dependence can safely be placed on the success of the treatment of a single case of disease, in deducing therefrom a general principle of treatment, I would not be supposed to

present the present case as one that is to establish a mode of treating this disease; but as it has heretofore been considered so hopeless a form of disease, and as the method proposed by Professor Staughton had been tried, before seeing his communication, without any sensible benefit, I am induced to offer the present case, with the hope that the method of treatment may be more thoroughly tested by those who shall have the opportunities.

S. C., æt. about 30, had lost the sight of the left eye about a year before, from a slow inflammation of the conjunctiva, by which the cornea was rendered permanently opaque;—in January, 1828, applied for advice, for inflammation of the conjunctiva of the right eye, with a considerable degree of opacity of the cornea, and an ulcer on its outer convexity, which was about the size of half a pea, through which protruded the internal lamina of the cornea—or what was formerly so considered. This ulcer was healed by the Argent. Nit., but the opacity of the cornea was not removed.

About eight months after this, application was again made, with the expectation that some operation might be performed by which vision might be restored. At this time, I found the cornea very conical, or projecting, and less opaque—some part of which was quite transparent. This was a case I knew not what to do with: but as the fellow was so unfortunate, I concluded to try some applications to the eye. After trying a number with no perceptible benefit, I made trial of the Ung. Hydr iod. Potassæ, and lastly

of the iodine ointment : but all to no purpose.

The fellow still continued his importunity for some kind of an operation, although he had been repeatedly told that no operation could be performed which would benefit vision. As he complained of some tense pain in the ball of the eye, I thought that an evacuation of the aqueous humor might afford some temporary relief from the pain. Accordingly I punctured the cornea, on one side, with the point of a lancet, with immediate relief from the pain. On examination of the eye some weeks after, I thought there was a perceptible diminution of the prominence of the cornea, although the diminution was very slight. This induced me to repeat the operation, which I did by making a larger puncture. This was followed by a more sensible diminution of the disease.

The third and last operation

consisted in a still larger section of the cornea. This time the common cornea knife was used, and a section of the cornea, corresponding with the external angle of the eye, about one third of an inch in length, was made. The projection of the cornea did not seem to return after this operation, and it continued gradually to diminish until the cornea became considerably flatter than natural ; and although the opacity of the cornea has prevented distinct vision, yet its conical form seems permanently removed—as it has been more than a year since this change took place.

I find, on consulting Mr. Travers, that he suggests the same operation as not an improbable one, although I was not aware that he had made the suggestion at the time I operated.

Yours, &c.

BURLEIGH SMART.

Kennebunk, Me., Dec. 9, 1830.

BOSTON, TUESDAY, JANUARY 18, 1831.

MR. BELL'S LETTER TO HIS PUPILS  
OF THE LONDON UNIVERSITY.

THE connection of Mr. Charles Bell—the chief ornament and support of the London University—has at length been entirely dissolved, after a series of circumstances which have excited the attention and interest of the Profession. As his final letter to his class contains allusions to the true grounds of his disaffection, and some remarks which will not be lost to the younger members of the Faculty, we give it to our readers entire.

GENTLEMEN,—Your good sense will suggest to you why I ought not, on

this occasion of addressing you, to assign all my reasons for leaving the London University. Such a course would involve matters of which you will be better judges hereafter ; but I owe you an apology for the suddenness with which I have left you, and an explanation why a resolution, deliberately taken, should be so abruptly disclosed and acted upon.

My resolution to resign at the conclusion of the present season, did not proceed from the conduct of individuals ; nor did I take upon me to estimate the characters or talents of my associates. My objections have been to a system ; and, in justice to you, I ought to add, that the advantages I looked for from a different arrangement would have come very

slowly, and could hardly have been attained in your time. The disappointment of my hopes does not imply that any professor is unworthy of your most respectful attention, or that the school is inferior to any other. The statement which you will find in the following pages belongs to a different question altogether—the formation of a school superior to what this country has had yet to boast of, in system, subdivision of labor, and arrangement; this failing, I did not desire to continue a day in the University of London.

The members of the Council, from education and condition in society, are well suited to preside over the classical and mathematical studies; but they have never appeared to me to respect sufficiently the medical profession; and, consequently, have never sought for information to enable them to improve the medical school. When they appointed professors, it was perhaps too much to expect that they should defer to an authority so recently of their own creation.

After my long experience in teaching, it would have been strange if I had not had a desire to see the system of our schools improved; and I should have been to blame if I had not used my endeavors, on an occasion of such splendid promise, to gain something for my profession. This engaged me in expostulations with the Council of the University, so that I am willing to acknowledge that they may have traced much of their trouble to me; but they could neither comprehend the strong motives which urged me, nor foresee the happy consequences of the improvements which I advocated. Here was the bias given, which it is necessary to know in order to understand how impediments so slight as those I am to describe could be attended with effects so unexpected.

I had my lesser and personal grievances. To those who know how little I value physiology, in the common acceptation of the term, it will

be a proof of my desire to see the experiment of a new school fairly tried, that I submitted to be called professor of a science—if a science it be—on which an inceptor candidate for medical degrees would read lectures more readily than I could. You are aware that the subjects on which I lectured were the higher departments of anatomy—that I reasoned on a demonstration in which my knowledge of anatomy and my experience of disease came into use, as laying the foundation of just principles in the practice of your profession. If you will call to recollection any one lecture, or take the last of all as an instance, you will see how little the subject-matter of my lectures corresponds with the title put upon them.

It has been imputed to me as a fault, that I wished to preside over the anatomical department. I avow this; and I entered the University upon that understanding. But this, on my part, was no assumption of superiority, beyond what time, study, and experience, give to every man. It was my expectation, that all the lectures connected with anatomy, comparative anatomy, physiology, pathology, surgical anatomy, would be formed into such a system as would at once allow each professor full opportunities to display his talents, and fulfil the liberal intentions of those who designed a great school of medicine. All the errors and misconceptions that have occurred, have proceeded from the original appointments made by the Council: and when I express this, let it not be said that I take upon myself to object to the individuals selected. But the elections were all made before any system was arranged. If the Council had been fully aware of what was necessary for the improvement of the medical schools, and had made out the different departments to be taught, and had afterwards appointed professors to these departments, all might have gone on satisfactorily. But professors were elected, and then attempts were made to form a sys-

tem; so that when the subjects were distributed, each professor conceived that the rights he had formally obtained through his election were infringed. We may here see, if we take up the case of any particular professor, that he was vindicated in making his complaints: and we may see also how the Council became involved in trouble; which they attributed to the individual applicants, when it all necessarily arose, as I have said, from a wrong step of their own at the commencement. They wished to do justice; and if we could suppose that a certain number of claimants were to be supplied from a common stock of a common material, justice would have sufficed; but here, knowledge as well as justice was necessary to a proper distribution. We know that in the present season no fewer than five gentlemen were engaged in teaching human anatomy; and three certainly were lecturing in the same class-room, on the same subjects, and with the same preparations put upon the table, three successive times in the same day. No member of the Council ought to take offence, when I say that unless he has a perfect knowledge of the whole subject, and experience of the practical consequences, he cannot comprehend the effect of such promiscuous distribution, or of such a sacrifice to the principle of equality.

A few days after the first opening of the University I saw that the system would not work, and I then offered my resignation. In the end of last session it was equally obvious to me that the machine would not right itself, and that no efforts of mine could avail; and I declared, that unless different arrangements were made, I must leave the University. My proposal was, that the Council should put down on paper their understanding of my designation and duties in the London University. This I was to submit to my friends; and if they approved, I promised to proceed zealously. The Council showed every desire to meet my

wishes; but about this time they became engaged in other discussions, no doubt sufficiently distracting, but with which I had nothing to do; and thus the summer was spent, and the first of October drew near. It was then no time to resign; and therefore I held the secret intention of resigning at the end of the present season.

You know that, at all times, I address myself too earnestly to the subject of my lecture to admit the introduction of a name, or a sentiment, at variance with the tenor of my discourse. You know this now; and I trust that you do me justice. It has been stated that I said, in my public lecture, that unless some gentlemen were removed from the University I would resign. I repeat that I objected to the system, and not to any individual—to the acts of the Council, and not to the conduct of professors.

When I first lectured to you, you appeared to evince curiosity rather than interest; but, as you came to comprehend the subject, I had the pleasure of seeing you enter more and more deeply into it; and, for my own part, always agreeably engaged when with the students, I had forgotten the existence of any body of men that could disturb our harmony. In the meantime the Council of the University were occupied, unwittingly to me, with a matter which they have magnified into importance. In my clinical lecture at the Middlesex Hospital, I had expressed a desire to enlarge the opportunities of the pupils there and at St. George's. I stated that the opinions of men educated in the principles of Mr. Hunter, and with the experience of a London hospital, agreed in most of the great questions of practice; and I said that, if I could gain for my own pupils the advantage of hearing another hospital surgeon, they would learn that men of experience and of character, who had no necessity to court notoriety by new and bold operations, differed very little in opinion. If the pupils could have such advan-

tages, they would better withstand the prevailing vice of the profession.

This desire, so natural to any one who had the best interests of the hospital pupils at heart, was brought before the Council of the University by some meddling fool; on which they transmit to me a minute with the following expression:—"That it appears that Mr. Bell holds out encouragement to another school of medicine, and withdraws his support from the class of surgery in the University."

If, by such means, I placed my hospital pupils within the influence of the teachers in St. George's, I at the same time brought the pupils of St. George's Hospital under the attraction of the University; and the Council are taking a very humble tone if they admit that, by placing the two schools in comparison, that of the University must suffer. It is the last of numerous instances in which they have been influenced by the fears and prejudices of those who communicated with them.

The expression of my intention to retire at the conclusion of the present course was drawn from me by a request to form one of a new society, which had nothing to do with my public prelections. I had strong reasons for declining this invitation; and, to avoid giving offence, I put my refusal upon the shortness of the period that I would remain a member of the University. I added, that I would, in due season, officially and regularly, according to the obligation I had subscribed, notify my intention of resigning. I need not add that I anticipated no such consequences as have followed. I hoped to have had the pleasure of accompanying you through the season in your course of studies; but the Council, learning that I had so expressed myself, without any communication with me, chose to act upon this as a resignation, and followed up the minute, which I have in part transcribed, with a resolution, that "immediate

steps be taken for the appointment of a professor of physiology, who shall enter on his duties at the opening of the next session."

Such a minute, if respectfully conveyed, must still have been offensive; but it was prefaced with no word of acknowledgment or regret,—the more surprising as coming from high-bred gentlemen. I have said truly, that when I entered my class-room, I have thought only of my subject, and of teaching you; and this at a time when I had much to irritate me. I had a good title to expect, that, when the Council came to act deliberately, as the patrons of the University, they would have considered, that from the hour in which I had opened the classes of the University, to the moment of their deliberations, there had not been a pause in my exertions; and that the testimony of your uninterrupted attendance, zeal for the subject, and respect for your teacher, had accompanied me throughout. Repeatedly, during the last two years, have I urged to the members of the Council, that they should take their impressions from the attendance of the pupils on the public lectures, and from nothing else.

On receiving this minute, I did not take my final resolution without giving the Council the opportunity of rescinding it, in order that I might fulfil my engagements with you. I informed them that, with such a resolution on their books, I could not again meet my pupils; but I did not feel myself called upon to accept their invitation to converse upon it. The well-grounded respect which I had for many members of the Council, and especially for those whose good-nature led them to come forward on such occasions, had often before induced me to yield everything to their wishes; but here it was necessary to be decided. There may have been some feeling in this matter; but if I had not in such circumstances taken leave of the University, I should have compromised my own

respectability, and that of the profession for which you are preparing yourselves. I need not say that I acted against my own interest when I resigned my lectures, which have been a continual source of satisfaction and improvement to me, when I gave up emoluments not insignificant to my very moderate income, and when I exposed myself to the displeasure of many influential personages. For the last four years I have had my mind but too intently occupied with the interests of the London University. I have lost much time at a period of life when it is hard to redeem it.

Any grave and sensible person, on hearing this statement, may well say, "Why did not Mr. Bell deliver his lectures, and think of nothing more?"—This was exactly what I attempted to do—the determination with which I commenced the season. But such a mode of proceeding seemed to irritate, more than the strongest expostulations that I had hitherto offered to the Council, and brought them to the resolution which has made our connexion no longer possible. Although I have said, from the deepest conviction, that the last duty a man should resign was that of giving the results of his experience to the younger members of his profession, I am now precluded from doing this, and must henceforth engage myself exclusively in the practice of my profession.

Gentlemen,—I could have wished that this interruption had occurred when I had finished my *Introductory Lectures on Design, as exhibited in the Animal Structure*. I then delivered a lecture to you on a general subject, which I would now desire you to consider as my last. Without reference to present circumstances, but proceeding from the interest I had in you, I endeavored to make an impression, which, if permanent, cannot fail to influence you through life. You may remember that I took the life and labors of Baron Haller as the

happiest example of the combination of the philosopher and the patriot; that I pointed out to you his enthusiasm in youth, with the restraints he put upon himself; the great labors he was engaged in at the middle period of his life, and their splendid results; his retirement, his philanthropy, and his remarkable death.

To prove the necessity of having a plan of life, and pursuing it steadily, and that however great a man's talents may be they require concentration and direction, I instanced the life of Mr. Hunter. I assured you that labor, and the pertinacious pursuit of great objects, were the characters of true genius. I directed you to the contemplation of the museum in the College of Surgeons, as a proof of how much one man may do in his day.

As a further proof of genius, being distinguished from the possession of trifling accomplishments, I placed before you the character and labors of Baron Cuvier. As some encouragement in those studies which you now believe to be so severe a call upon your patience and industry, I represented Cuvier engaged over an immense heap of portions of bones, the fossil remains of animals. I represented him as possessed of a knowledge of the minute processes of the bones, to which your knowledge is only as the alphabet of a child. I represented to you this man of great genius, and highly honored in all countries, submitting to the patient investigation of these materials, until he selected and arranged the minute portions into skeletons; thus discovering the classes and genera of animals that no longer inhabit the earth, and ascertaining the revolutions which the world itself had undergone. And this I proved to you was the effect of true genius, carrying a man forward to great objects through means apparently trifling to common minds.

It was in the conclusion of that lecture, in which I felt you sympathised with me as pupils, that I sought

to turn you from frivolous pursuits, and to direct you in the course of study best suited to advance you to distinction, and which at all events would guard you from ennui, and give you a pride in your profession. I would have you to look back upon that lecture as conveying my last advice, and as evincing the interest I have in you.

The sentiment is so natural, that I am sure you will believe me when I say, that short as the time has been which we have spent together in the present season, being the last of my pupils, I must ever feel greater interest in you than in those who have gone before you.

CHARLES BELL.

#### QUACKERY.

A CELEBRATED quack in England, Mr. John St. John Long, has recently undergone a trial for manslaughter, and the following are the words of his sentence:—

"John St. John Long, you have been convicted of the crime of manslaughter, with which you stood charged; and, after a patient hearing of the evidence, and a deliberate consideration of the case, a jury of your country have been induced to find you guilty. Every circumstance connected with your case has been duly considered by the Court, and they are induced to order the judgment which it is my duty to pass. The sentence of the Court upon you is, that you pay a fine of £250 to the King, and that you be imprisoned in his Majesty's jail of Newgate until that fine be paid."

This is the second time this gentleman has been placed at the bar to answer for the fatal effects of his

practice; and yet, though perfectly unaccountable, his dupes seem, by all accounts, to increase with the development of his audacity and ignorance.

*Tapping in Hydrocephalus.*—Dr. Conquest has performed the operation of paracentesis in another case of hydrocephalus. Thirty ounces of fluid were withdrawn at two operations. At the first operation, 12 ounces were taken away; and at the second, 18. The child is apparently well, the bones having nearly closed, and the patient free from any evidence of the disease, although before the operation it had fits almost incessantly, and was altogether a most deplorable object. But the most gratifying and important circumstance connected with the appearance of this infant was, that it gave him an opportunity of stating that the girl on whom he successfully operated last year continues in perfect health, not having a vestige of her former disease.

*Rights of Authors.*—A bill has passed the House of Representatives of the United States, and will doubtless pass the Senate, securing to authors the exclusive right of publishing and vending their works for 28 years. At the expiration of this time, any one of the family who may desire it, is to retain the same right 14 years longer.

*Boylston Prize.*—The Committee of the Boylston Medical Society of Harvard University, for examining prize dissertations, has unanimously awarded the premium to Mr. JAMES JACKSON, Jr., of this city. Subject—"Inflammation of the Lungs."

Whole number of deaths in Boston the week ending January 5th, 14. Males, 7.—Females, 5. Stillborn, 2.

Of consumption, 3—scarlet fever, 1—cholera infantum, 1—dropsy, 1—dysentery, 1—burn, 1—fits, 1—unknown, 1—mortification, 1—drowned, 1.



## ADVERTISEMENTS.

### VACCINE VIRUS.

**N**ATHAN JARVIS, on account of frequent solicitations, will constantly keep for sale FRESH VACCINE VIRUS, taken by a physician from healthy subjects. It will be furnished at a reasonable price on demand, either in scabs or quills. Physicians in the country who are in want of Virus, can send their orders by mail, as it can be enclosed in a letter and transmitted without any great expense of postage. June 1.

*Apothecaries' Hall,  
No. 188 Washington Street.*

### NEURALGIC DISEASES.

**A** TREATISE on Neuralgic Diseases, dependent upon Irritation of the Spinal Marrow, and Ganglia of the Sympathetic Nerve. By THOMAS PRIDGIN TEALE, Member of the Royal College of Surgeons in London, &c. Just received by CARTER & HENDEE. Nov. 2.

**J**UST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.

### WILLIAMS ON DISEASES OF THE LUNGS.

**T**HIS day received, by CARTER & HENDEE, "A Rational Exposition of the Physical Signs of the Diseases of the Lungs and Pleura, illustrating their Pathology and facilitating their Diagnosis." By CHARLES J. B. WILLIAMS. Dec. 6.

### BECLARD'S GENERAL ANATOMY.

**C**ARTER, HENDEE & BABCOCK have this day received—Elements of General Anatomy, or a Description of every kind of Organ composing the Human Body. By P. A. BECLARD, Professor of Anatomy of the Faculty of Medicine of Paris. Preceded by a critical and biographical Memoir of the Life and Writings of the Author. By OLIVIER, M.D. Translated from the French, with Notes.

By JOSEPH TOGNO, M.D., Member of the Philadelphia Medical Society. Dec. 28.

### HALL ON LOSS OF BLOOD.

**T**HIS day received, by CARTER & HENDEE, "Researches, principally relative to the Morbid and Curative Effects of Loss of Blood." By MARSHALL HALL, M.D. F.R.S.E. Dec. 6.

### GERMAN LEECHES.

**R**ICHARD A. NEWELL, Druggist, Summer Street, respectfully informs the Physicians and Public generally, that he has just received a fresh supply of the above-named *Leeches*, which will be sold at a fair price.

N. B.—Leeches sent to any part of the city, and applied, without extra charge, by day or by night. 6w—Nov. 8.

### SURGICAL INSTRUMENTS AND CHEMICALS.

**S**TUDENTS in want of the above articles, would do well to call, before purchasing, at BREWER & BROTHERS', Nos. 90 and 92 Washington Street—Boston. Oct. 15. ep3m

### ABERCROMBIE ON DISEASES OF THE STOMACH.

**J**UST received by CARTER & HENDEE—Pathological and Practical Researches on Diseases of the Stomach, the Intestinal Canal, the Liver, and other Viscera of the Abdomen. By JOHN ABERCROMBIE, M.D., Fellow of the Royal College of Physicians of Edinburgh, &c., and first Physician to his Majesty in Scotland. Sept. 28.

### SURGEON DENTIST'S MANUAL.

**J**UST received, by CARTER & HENDEE, The Surgeon Dentist's Anatomical and Physiological Manual. By G. WAITE, Member of the Royal College of Surgeons. Nov. 2.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.